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**Manual for**  [**(BIO-ENABLER : BIO MANUFACTURING HUBS )**](http://birac.nic.in/user/userdashboard.php?scheme=1)

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**Step 1: Basic Information**

**Basic Information**

* Name of The Organization

--Select--

Select the organization name from the select box.

* Type of The Organization

--Select--

Title of Proposal

* Title of Proposal

Write the brief name of proposal which is not exceeding 250 characters.

* Duration in Months

Select Month

Browse a file and upload it. Make sure your file is in PDF format.

--Select--

* Category

Select the duration of the proposal.

--Select--

* Thematic Area
* Proposal Submitted Solely Jointly with collaborators

Choose one of the radio button accordingly.

In proposal submitted when you choose “Jointly with collaborators”, a select box will be appeared.

Enter Collaborator(s) Details

--Select--

* No. of Collaborators

Here you have to choose the number of collaborators and click the “Enter Collaborators Details” button. After click on “Enter Collaborators Details” button, there is a number of rows of collaborator Details according to your selection. You have to fill the details here.

**Collaborator Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **\*Collaborator Name**  **(Company/Institute Name)** | **\*Name of Contact Person** | **\*Email Address** | **\*Collaborator Type** |
|  |  |  |  |
|  |  |  |  |

Fill all the details accordingly.

Save and Continue

Save your form.

Reset all your fields.

Reset

**Step 2: Particular of the Applicant(s)**

**For Company :**

#### Particulars of the Applicant Organization

#### Name of the Applicant Rishi Chandil

**Registered Office Address**

#### Address1: RZ-3B/215, Address2: J Block

#### Street/Village : West Sagarpur City/Town: New Delhi

#### State: Delhi Country: India

#### Pin/Zip code: 110003 Landline: +91-11-24389600

#### Mobile: +917824389600 Fax: +91-11-24389611

#### Website [www.rishichandil.in](http://www.rishichandil.in)

#### Above details are automatically comes while you are in applicant details page. These are the details which you filled at the time of registration.

#### \*Address1: Address2:

**Details of the Project Implementation Site**

#### Address3: \*City/Town:

#### \*Country: \*State:

**Pin/Zip Code: \*Landline:**

**Mobile: Fax:**

Fill all the details under details of the project implementation site.

dd-mm-yyyy

#### Brief Background of The Applicant

Date of Incorporation of the Applicant

Set date of incorporation of the applicant in format: dd-mm-yyyy

**\*R&D Activity**

**\*Manufacturing**

**\*Trading / Imports & Marketing**

Fill all the details under Details of the Project Implementation Site.

#### Applicant Registration Details

* **\*Applicant Type** Public Limited Private Limited

Select Applicant Type accordingly.

Browse

* **\* Incorporation Certificate:**

Browse the Registration details file. Make sure your file is in PDF format.

Browse

* **\*Annual Report for Previous Three Financial Year**

Browse the file. Make sure your file in PDF Format.

* **\*Are the Shares of the Company Held to the extent** YesNo

**Of 51% By Indian Citizens (including NRIs)?** Select your option accordingly.

* **\*Promoters Background Including Association**

Browse

**With Other Industries and Contribution In**

**Those Industries** Browse file. Make sure your file in PDF format.

* **\*CA certified share holding pattern of the**

Browse

**Company of current quarter as on 31-12-2023** Prescribed Format

Browse file. Make sure your file in PDF format. Click on link “*Prescribed Format*” for prescribed format.

* **\*Please attach a scan copy of the PASSPORT**

Browse

**(First and last page only) or ADHAAR Card**

**Of all the shareholders holding more than**

**10% of company shares** Browse file. Make sure your file in PDF format.

#### Project Implementation Details

* **\*Incubation with any of the Yes No**

**Recognized Incubation Facility?**

* **\*** **Having adequate in-house facility to address the Yes No**

**project implementation aspects**

**(which shall be evaluated during the site visit)**

#### Outstanding Loan

* **Are There Any Outstanding Loans? Yes No**

Browse

**\*Please Upload Details in**

**Prescribed Format**

If you choose “Yes”, a file browser box will be appeared. You have to browse a related file.

For prescribe format just click on “*Prescribed Format*” link.

* **Has The Applicant Received Yes No**

**/Applied For Funding From  
 Government/Any Other Agency?  
 If yes then details of research**

**Projects executed by the company in last 3 years.**

If you choose “yes”, a “Number of Times” select box will appeared. You have to choose the number and click on “Enter Details” button.

Enter Details

--Select--

**\*Number of Times**

After clicking on “Enter Details” button a “Funding Details” box will be appeared according to your selection in “Number of Times” select box.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Title** | **Source Funding** | **Total Project Cost (Rs. In Lakhs)** | **Present Project Status** | **Date of Sanction** | **Date/Due Date of Completion** | **Amount Received As Grant-In-Aid (Rs. In Lakhs)** | **Amount Received As Loan (Rs. In Lakhs)** | **Total Approved Cost (Rs. In Lakhs)** |
|  |  |  | Select |  |  |  |  |  |

#### Details of the funding received by PI from government/any other external agency for the same or technically related projects

Fill all the details accordingly.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Reset all your fields.

Reset

Cancel your form and it return you to main page

Cancel

(Proposal Submission form).

#### For Institutes :

**Organization Details**

dd-mm-yyyy

#### \*Date of Incorporation of The Applicant:

#### \*Recognition or Accreditation Status:

Browse

#### \*Upload file:

#### \*Describe the R & D Strategy and

#### Portfolio/Pipelines [not more than 500 words]:

#### \*Address1: Address2:

**Details of the Project Implementation Site**

#### Address3: \*City/Town:

#### \*Country: \*State:

**Pin/Zip Code: \*Landline:**

#### Mobile: Fax

Fill all the details accordingly.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Reset all your fields.

Reset

Cancel your form and it return you to main page

Cancel

(Proposal Submission form).

#### Step 3: Principal Investigator Details

--Select--

#### Principal Investigator Details

#### \*Title

#### \*First Name Last Name

DD-MM-YYYY

#### \*Designation \*DOB

#### \*Gender Male Female \*Highest Qua.

#### \*Email

#### \*Address1 Address2

#### \*Street/Village \*City/Town

#### Pin/Zip Code

#### \*State Country

--Select--

--Select--

#### Landline

#### Mobile

Browse

#### \*Upload Resume in Prescribed Format

#### Note: Please download to fill the details and signed copy to be uploaded in PDF format.

#### \*Upload Organization’s Authorisation Letter to for Submission of Proposal in Prescribed Format

Browse

#### Note: Please download to fill the details and signed copy to be uploaded in PDF format.

#### \* Fill all the mandatory details for Primary key investigator details.

#### If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

#### Save your form.

Cancel

#### Cancel your form.

**Step 4: Applicant Team Members**

#### Applicant Team Members

#### 

Close

Add New

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| S. No. | Name | Designation | Email | Landline | Mobile | Resume | Edit | Current Status |
| 1 | Rishi Chandil | Junior Assistant | [ris@gmail.com](mailto:ris@gmail.com) | 011-24389600 | 9999999999 | View File | Edit |  |

The table data automatically added when you fill the form, which is appeared when you clicked on “Add New” button.

#### Team Member Details

#### \*Title

--Select--

#### \*First Name

#### \*Last Name

#### \*Gender Male Female

#### \*Designation

#### \*Landline

#### \*Mobile

#### \*Email

#### \*Please Upload

Browse

#### Resume in Prescribed Format (Click for the prescribed format)

#### Fill all the mandatory fields accordingly.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Close

Close the form.

**Step 5: Shareholding Pattern of the Applicant Organization and Collaborators**

**Shareholding Pattern of the Applicant Organization**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Category of shareholder** | **Number of shareholders** | **Total number of shares** | **Total shareholding as a % of total number of shares** | **Nature of Shares Equity Preference** |
| **Shareholding of promoter & Promoter Group** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PCI) |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Foreign NRI** | | | | | |
| **2.a** | Foreign NRI |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Company |  |  |  |  |
| **Total** | | 0 | 0 | 0.00 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Public Shareholding** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PIO) |  |  |  |  |
| 1. **Foreign** | | | | | |
| **2.a** | Foreign-NRI(OCI/PIO) |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Organization |  |  |  |  |
| **Total** | | 0 | 0 | 0 | 0.00 |
| **Grand Total** | | 0 | 0 | 0 | 0.00 |

**Shareholding Pattern of the Collaborator1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Category of shareholder** | **Number of shareholders** | **Total number of shares** | **Total shareholding as a % of total number of shares** | **Nature of Shares Equity Preference** |
| **Shareholding of promoter & Promoter Group** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PCI) |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Foreign NRI** | | | | | |
| **2.a** | Foreign NRI |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Company |  |  |  |  |
| **Total** | | 0 | 0 | 0.00 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Public Shareholding** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PIO) |  |  |  |  |
| 1. **Foreign** | | | | | |
| **2.a** | Foreign-NRI(OCI/PIO) |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Organization |  |  |  |  |
| **Total** | | 0 | 0 | 0 | 0.00 |
| **Grand Total** | | 0 | 0 | 0 | 0.00 |

**Shareholding Pattern of the Collaborator 2**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Category of shareholder** | **Number of shareholders** | **Total number of shares** | **Total shareholding as a % of total number of shares** | **Nature of Shares Equity Preference** |
| **Shareholding of promoter & Promoter Group** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PCI) |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Foreign NRI** | | | | | |
| **2.a** | Foreign NRI |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Company |  |  |  |  |
| **Total** | | 0 | 0 | 0.00 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Public Shareholding** | | | | | |
| 1. **Indian** | | | | | |
| **1.a** | Indian Citizen |  |  |  |  |
| **1.b** | Indian Organization |  |  |  |  |
| **1.c** | NRI holding Indian Passport (Does not include OCI/PIO) |  |  |  |  |
| 1. **Foreign** | | | | | |
| **2.a** | Foreign-NRI(OCI/PIO) |  |  |  |  |
| **2.b** | Foreign Individual |  |  |  |  |
| **2.c** | Foreign Organization |  |  |  |  |
| **Total** | | 0 | 0 | 0 | 0.00 |
| **Grand Total** | | 0 | 0 | 0 | 0.00 |

Fill all the mandatory fields’ details accordingly.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Cancel

Cancel the form.

Reset all the fields

Reset

**Step 6: Particulars of the Collaborator**

**Collaborator**

#### Name of the organization : Collaborator Name

#### Type of the Organization : Public/Private Research Institutions

#### \*Address1 Address2

#### \*Street/Village \*City/Town

#### Pin/Zip Code

#### \*State Country

--Select--

--Select--

#### \*Landline

#### \*Mobile

#### Fax

#### Website \*Email

#### \*Year of Establishment of the Organization

#### \*Recognition or Accreditation Status

Browse

#### \*Upload File

#### Describe the R & D Strategy and Portfolio/Pipelines [not more than 500 words]

\***Has The Applicant Received Yes No**

**/Applied For Funding From  
 Government/Any Other Agency?  
 for the same or related projects**

If you choose “yes”, a “Number of Times” select box will appeared. You have to choose the number and click on “Enter Details” button.

Enter Details

--Select--

**\*Number of Times**

After clicking on “Enter Details” button a “Funding Details” box will be appeared according to your selection in “Number of Times” select box.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Title** | **Source Funding** | **Total Project Cost (Rs. In Lakhs)** | **Present Project Status** | **Date of Sanction** | **Date/Due Date of Completion** | **Amount Received As Grant-In-Aid (Rs. In Lakhs)** | **Amount Received As Loan (Rs. In Lakhs)** | **Total Approved Cost (Rs. In Lakhs)** |
|  |  |  | Select |  |  |  |  |  |

#### Details of the funding received by PI from government/any other external agency for the same or technically related projects

#### 

#### \*Title

#### \*First Name Last Name

DD-MM-YYYY

#### \*Designation \*DOB

#### \*Gender Male Female \*Highest Qua.

#### \*Email

#### \*Address1 Address2

#### \*Street/Village \*City/Town

#### Pin/Zip Code

#### \*State \*Country

--Select--

--Select--

#### \*Landline

#### \*Mobile

Browse

#### \*Upload Resume in Prescribed Format

#### Note: Please download to fill the details and signed copy to be uploaded in PDF format.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Close

Close the form.

#### Step 7: Collaborator Team Members

#### Collaborator Team Members

#### 

Close

Add New

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| S. No. | Collaborator | Name | Designation | Email | Landline | Mobile | Resume | Edit | Current Status |
| 1 | Collaborator 1 | Rishi Chandil | Junior Assistant | [ris@gmail.com](mailto:ris@gmail.com) | 011-24389600 | 9999999999 | View File | Edit |  |

#### 

The table data automatically added when you fill the form, which is appeared when you clicked on “Add New” button.

#### Collaborator Team Member Details

**\*Collaborator**

#### \*Title

--Select--

#### \*First Name

#### \*Last Name

#### \*Gender Male Female

#### \*Designation

#### \*Landline

#### \*Mobile

#### \*Email

#### \*Please Upload

Browse

#### Resume in Prescribed Format (Click for the prescribed format)

#### Fill all the mandatory fields accordingly.

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Close

Close the form.

**Step 8: MoU**

**MoU**

#### Note: i) Please upload a copy of signed MoU between the applicant company and Collaborator(s). However, this upload is non - mandatory. ii) If MoU is not yet finalized, please click on save button and the status of current page would automatically change to done.

|  |  |  |
| --- | --- | --- |
| **Collaborator(s)** | **Upload MoU** | **View File** |
| **Collaborator 1** | Browse |  |
| **Collaborator 2** | Browse |  |

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Close

Close the form.

**Step 9: Proposal Summary**

**Proposal Summary – Setting up new facilities**

**\*Goal/Aim of the proposal:**

**\*Project Implementation Site:**

**\* Status of current facility, capacity,**

**capabilities and accreditations, if any:**

**\* Please confirm if any of the available**

**facilities and resources would be used**

**in proposed facility (provide details):**

**\* Please elaborate the biological**

**systems and processes for which the**

**facility is proposed:**

**\*** **Specify the available empty shell area,**

**if any for facility development and what**

**strengthening is required to take up**

**Biomanufacturing:**

**\* Proposed production capacity:**

**\* Anticipated Risk and mitigation plan:**

**\*Brick and mortar work for construction**

**of facility will not be supported.**

**If the facility requires construction work,**

**please share the plan for financial**

**support of the said activities:**

**\* Demonstrated experience of setting up**

**such facilities and enabling access to**

**start-ups:**

**\* Modalities of engagement and business**

**model to sustain the proposed facility**

**including service model (including revenue**

**generation plan and cash flow projections):**

**\* Resource commitments (applicant**

**need to specify the form in which their**

**contribution would be made):**

**\* Environmental and Health Risk Management Plan**

Browse

**(upload) (PDF Upto 2MB only):**

\***Please upload relevant information**

Browse

**(PDF Upto 2MB only):**

Browse

\* **Additional Upload 1 (PDF Upto 2MB only):**

**\* Additional Upload 2 (PDF Upto 2MB only):**

Browse

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Close

Cancel the form

Reset all fields

Reset

**Step 10: IP Details**

*\* Note: Please select and remove unused rows.*  
*\* Note: All fields are mandatory and should not exceed 200 words*

1. **IP Status**

**IP DETAILS**

**IP DETAILS**

**\*1.1 Details of Background IP**

**generated so far and possibility of**

**generating new IP through this project**

**\*1.2 Countries/jurisdiction where the**

**applicant intends to practice/market**

**the proposed technology**

Add

Remove

**\*1.3 List Of Patents That Appear To**

|  |  |  |
| --- | --- | --- |
| **Select** | **Patent Number** | **Patent Title** |
|  |  |  |

**Cover Any Part Of The Technology**

**Of Interest Or Similar (And Possibly**

**Overlapping) Technologies And**

**Thereby Restrict The Freedom-**

**To-Operate In The Envisaged Area.**

**\*1.4 How Would the Present**

**Proposal Be Able To Counter**

**The Above Restrictions?**

**\*1.5 List the Various Patented**

**Technologies / Processes /**

**Products That Would Be Made**

**Use Of For Manufacturing /**

**Commercialization Of The Proposed**

**Product / Process Along With**

**The Status Of The Patents.   
Whether Permission / License For**

**Use If Such A Patent Owned /**

**Being Sought For By The Company?**

**\*2. In Case the Technology Is Licenced**

|  |  |  |
| --- | --- | --- |
| **Select** | **Regulatory Approvals** | **Status Approvals obtained/ Approvals in process/ Applications yet to be submitted to the concerned authorities** |
|  |  |  |

**From Abroad, Status Of Independent**

**Validation In The Country Is To Be   
Provided Clearly**

**\*3.1. Regulatory Approvals and Protocols**

Remove

Add

**\*3.2.B. Protocols: Protocol in the**

**prescribed format required by**

**the concerned agency for giving**

**approvals**

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Reset

Reset all fields

Close

Cancel the form

**Step 11: Regulatory Details**

**Regulatory Approvals**

**\*DCGI Approval** Yes No

If you click on “Yes” the following field are appeared.

Browse

\*Upload

Browse DCGI Approval related file. Make sure it is in PDF format.

Details (if not applicable, fill NA)

**\*RCGM & GEAC Approval** Yes No

If you click on “Yes” the following field are appeared.

Browse

\*Upload

Browse RCGMApproval related file. Make sure it is in PDF format.

Details (if not applicable, fill NA)

**\*National Biodiversity Approval** Yes No

If you click on “Yes” the following field are appeared.

Browse

\*Upload

Browse related file. Make sure it is in PDF format.

Details (if not applicable, fill NA)

**\*Pollution Control Board Approval** Yes No

If you click on “Yes” the following field are appeared.

Browse

\*Upload

Browse related file. Make sure it is in PDF format.

Details (if not applicable, fill NA)

**\*Any other Approval** Yes No

If you click on “Yes” the following field are appeared.

Browse

\*Upload

Browse related file. Make sure it is in PDF format.

Details (if not applicable, fill NA)

Save your form.

Save

Reset all the fields.

Reset

Cancel the form.

Cancel

**Step 12: Upload details of services provided to different entities**

#### Please upload details of services provided to different entities

**File:**

Browse

Save your form.

Save

Reset all the fields.

Reset

Cancel the form.

Cancel

**Step 13: Proposal Objectives**

#### OBJECTIVES & WORK PLAN

\* Please indicate overlap of any objective funded by any other funding agency/ (ies). Kindly provide disclosure amendments.

\* Indicate how each objective is exempted for Service Tax, in case exemption is desired.

|  |  |  |  |
| --- | --- | --- | --- |
| **Objective** | **Methodology/Experimental Design Detailed Work Plan** | **Alternate Strategies** | **Process Indicator for Measuring Success** |
|  |  |  |  |
|  |  |  |  |

Fill all the necessary fields.

Save your form.

Save

Reset all the fields.

Reset

Cancel the form.

Cancel

**Step 14: Proposal Activities & Timelines**

##### **Objective Wise Activities & Timelines**

##### *Note: Please Select and Remove Unused Rows*

##### **Objective: Test objective 1**

This form appeared you if you filled the previous form “[SPECIFIC PROJECT PLAN AND DELIVERABLES](http://birac.nic.in/user/addobjectivefullmisc_new.php?calid=12&pid=2623&category_id=5&action=edit)”.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Select** | **Activities to be  undertaken by the company to  achieve a particular objective** | **Month of Start of Activity** | **Month of End of Activity** | **Indicators Of Progress** | **Activities to be undertaken by the collaborator to achieve a particular objective** |
|  |  | 0 |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Please enter 1st Milestone under 1st Objective:** | | | |
| **S. No** | **Milestone** | **Month of Start of Activity** | **Month of End of Activity** |
| 1. |  | 0 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Select** | **Activities to be  undertaken by the company to  achieve a particular objective** | **Month of Start of Activity** | **Month of End of Activity** | **Indicators Of Progress** | **Activities to be undertaken by the collaborator to achieve a particular objective** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

##### **Objective: Test objective 2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Please enter 2nd Milestone under 2nd Objective :** | | | |
| **S. No** | **Milestone** | **Month of Start of Activity** | **Month of End of Activity** |
| 2. |  |  |  |

Fill all the necessary fields.

Save

Save your form.

Reset all the fields.

Reset

Cancel

Cancel

**Step 15: Proposal Milestones**

##### **Proposal Milestones**

Note: - Please Select At least 3 Activities as Monitor able

Milestones for Release of Instalments.

|  |  |  |  |
| --- | --- | --- | --- |
| **S. No** | **Milestones** | **Month of End of Activity (In Months)** | **Description** |
| \* 1. |  | --NA-- | --NA-- |
| \* 2. |  | --NA-- |  |
| \* 3. |  | --NA-- |  |
| \* 4. |  | --NA-- |  |

Fill all the mandatory details.

Before “Save” the form you have to click “Select/Update Milestone” button.

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel your form.

**Step 16: Details of Equipment & Accessories (Available)**

##### **Details of Equipment Available for this Project with Applicant**

##### **Available Equipment Details**

Note: Please select and remove unused rows.

|  |  |  |
| --- | --- | --- |
| **Select** | **Name of Equipment** | **Units** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Add More

Remove

Fill all the mandatory details.

#### Collaborator Name Institutions

#### Details of Equipment Available for this Project with Collaborators(s)

|  |  |  |
| --- | --- | --- |
| **Select** | **Name of Equipment** | **Units** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Fill all the mandatory details.

Add More

Remove

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 17: Details of Equipment & Accessories Proposed**

##### **Details of Equipment Proposed to Be Acquired Through Applicant’s Contribution**

##### **Proposed Equipment’s & Accessories Details**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Select** | **Infrastructure/Equipment** | **Specification of the Equipment** | **Quantity** | **Specific Requirement in the Project** | **Total Estimated Value**  **(Rs. In Lakh)** |
|  |  |  |  |  |  |
| **Total \*** | | | | | |

Remove

Add More

|  |
| --- |
| **Accessories to Be Acquired through**  **Applicant’s contribution (Rs in Lakh)** |

##### **Details of Equipment Proposed to Be Acquired Through Collaborator(s) contribution**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Select** | **Infrastructure/Equipment** | **Specification of the Equipment** | **Quantity** | **Specific Requirement in the Project** | **Total Estimated Value**  **(Rs. In Lakh)** |
|  |  |  |  |  |  |
| **Total \*** | | | | | |

Remove

Add More

|  |
| --- |
| **Accessories to Be Acquired**  **through collaborators contribution (Rs in Lakh)** |

#### Details of Equipment Proposed to Be Acquired Through BIRAC's Contribution for Applicant

##### **Contribution for Applicant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Select** | **Infrastructure/Equipment** | **Specification of the Equipment** | **Quantity** | **Specific Requirement in the Project** | **Total Estimated Value**  **(Rs. In Lakh)** |
|  |  |  |  |  |  |
| **Total \*** | | | | | |

Remove

Add More

|  |
| --- |
| **Accessories to Be Acquired**  **through BIRAC’s contribution for Applicant (Rs in Lakh)** |

**Details of Equipment Proposed to Be Acquired Through BIRAC's Contribution For Collaborators(s)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Select** | **Equipment** | **Specification of the Equipment** | **Quantity** | |  |  | | --- | --- | |  | **Name Of The Collaborators For Whom The Equipment Is Requested** | | **Specific Requirement in the Project** | **Total Estimated Value**  **(Rs. In Lakh)** |
|  |  |  |  | Select |  |  |
| **Total \*** | | | | | | |

|  |
| --- |
| **Collaborator Name Accessories to Be Acquired through**  **BIRAC’s contribution for Collaborators ( Rs in Lakhs)** |
| 0  **Collaborator 1**  0  **Collaborator 2** |

Fill all the necessary fields.

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 18: Details of Manpower (Available)**

##### **Manpower (Scientific and Technical) Already with Applicant Who Will Work In this Project**

##### **Manpower Details Available**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Select** | **Name** | **Qualification** | **Age (In Years)** | **Full Time/Part Time (Specify hours Per Day)** | **Experience**  **(In Year)** | **Role In The Project** | **Position** |
|  |  |  |  |  |  |  |  |

Add More

Remove

#### Collaborator 1 (Public/Private Research Institutions)

#### )

##### **Manpower (Scientific and Technical) Already Available with Collaborators(s) Who Will Work in This Project**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Select** | **Name** | **Qualification** | **Age (In Years)** | **Full Time/Part Time (Specify hours Per Day)** | **Experience**  **(In Year)** | **Role In The Project** | **Position** |
|  |  |  |  |  |  |  |  |

Remove

Add More

Fill all the mandatory fields.

#### Collaborator 2 (Company)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Select** | **Name** | **Qualification** | **Age (In Years)** | **Full Time/Part Time (Specify hours Per Day)** | **Experience**  **(In Year)** | **Role In The Project** | **Position** |
|  |  |  |  |  |  |  |  |

Remove

Add More

If you don’t want to save this form now. You save it next time with modification.

Save

Save as Draft

Save your form.

Reset

Reset all the fields.

Cancel the form

Cancel

**Step 19: Details of Manpower (To be hired)**

##### **Manpower (scientific and technical) to be hired for the project through Applicant’s contribution**

##### **Manpower Details to be hired**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Select | Position | No. of Position | Minimum Qualification | Experience  (In Year) | Age Limit, if any (In Years) | Duration For Which To be hired (in Years) | Role in the Project | Proposed Annual Salary (Rs. In Lakh) | Total Cost |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

Remove

Add More

Fill all the mandatory fields.

##### **Manpower (scientific and technical) to be hired for the project through Collaborator’s contribution**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Select | Position | No. of Position | Collaborators Where Manpower Is To Be Positioned | Minimum Qualification | Experience  (In Year) | Age Limit, if any (In Years) | Duration For Which To be hired (in Years) | Role in the Project | Proposed Annual Salary (Rs. In Lakh) | Total Cost |
|  |  |  | Select |  |  |  |  |  |  |  |
|  |  |  | Select |  |  |  |  |  |  |  |
|  |  |  | Select |  |  |  |  |  |  |  |
|  |  |  | Select |  |  |  |  |  |  |  |
|  |  |  | Select |  |  |  |  |  |  |  |

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form

**Step 20: Maintenance/Repair of Equipment/Consumable Details**

**Through Applicant’s Contribution**

##### **Consumable Details**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Select | Items | Quantity | Units (e.g. g/ml etc.) | Approximate Cost (Rs. In Lakhs) | Justification for the Requirement |
|  |  |  |  |  |  |

Remove

Add More

0.00

**Total Amount Required For Consumable**

#### Through Collaborators(s) contribution

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Select | Items | Quantity | Units (e.g. g/ml etc.) | Approximate Cost (Rs. In Lakhs) | Justification for the Requirement | Collaborators |
|  |  |  |  |  |  | Select |
|  |  |  |  |  | Add More | Select |

Fill all the mandatory fields.

Remove

0.00

**Total Amount Required For Consumable**

**Through BIRAC’s contribution for Applicant’s**

Note: Please select and remove unused rows.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Select | Items | Quantity | Units (e.g. g/ml etc.) | Approximate Cost (Rs. In Lakhs) | Justification for the Requirement |
|  |  |  |  |  |  |

Remove

Add More

**Total Amount Required for Consumable**

0.00

#### Through BIRAC’s contribution for Collaborators(s)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Select | Items | Quantity | Units (e.g. g/ml etc.) | Approximate Cost (Rs. In Lakhs) | Justification for the Requirement | Collaborators |
|  |  |  |  |  |  | Select |
|  |  |  |  |  | Add More | Select |

Fill all the mandatory fields.

Remove

0.00

**Total Amount Required for Consumable**

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel the form.

Cancel

**Step 21: Justification for Other Recurring Heads**

**Through Applicant’s contribution**

##### **Justification for Other Recurring Heads**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Travel Cost (Rs. In Lakh)** | **Travel Justification** | **Contingency Cost**  **(Rs. In Lakhs)** | **Contingency Justification** | **Training programs/Workshops  (Rs.In Lakhs)** | **Training programs/Workshops Justification** |
|  |  |  |  |  |  |

#### Through Collaborators(s) contribution

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Collaborators(s)** | **Travel Cost**  **(Rs. In Lakh)** | **Travel Justification** | **Contingency Cost**  **(Rs. In Lakhs)** | **Contingency Justification** | **Training programs/Workshops  (Rs.In Lakhs)** | **Training programs/Workshops Justification** |
| Name of the Collaborators |  |  |  |  |  |  |

Fill all the mandatory fields.

**Through BIRAC’s contribution for Applicant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Travel Cost (Rs. In Lakh)** | **Travel Justification** | **Contingency Cost**  **(Rs. In Lakhs)** | **Contingency Justification** | **Training programs/Workshops  (Rs.In Lakhs)** | **Training programs/Workshops Justification** |
|  |  |  |  |  |  |

#### Through BIRAC’s contribution for Collaborators(s)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Collaborators(s)** | **Travel Cost**  **(Rs. In Lakh)** | **Travel Justification** | **Contingency Cost**  **(Rs. In Lakhs)** | **Contingency Justification** | **Training programs/Workshops  (Rs.In Lakhs)** | **Training programs/Workshops Justification** |
| Name of the Collaborators |  |  |  |  |  |  |
| Name of the Collaborators |  |  |  |  |  |  |

Fill all the mandatory fields.

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 22: Details on Work to be outsourced**

##### **Details on Work to be outsourced**

Note: Please select and remove unused rows.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Select | Work Proposed To Be Outsourced | Name of the Institute/Organization to Whom it is Proposed to be Outsourced | Whether The Applicant has Already Signed any Contract With this Institution/Organization | Estimated Cost Involved In (Rs. In Lakhs) |
|  |  |  |  |  |

**Total**

0.00

Remove

Add More

**% of Contribution By The Applicant of the above Total Cost:**  %

0.00

**Contribution By the Applicant:**

0.00

**Support Requested from BIRAC:**

Fill all the mandatory fields.

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 23: Other Financial Details**

##### **Other Financial Details**

1. **\*Details of the Investment Made by The Company/Companies in the Project So Far, If Any**
2. **\*Details of the Other Sources of Funding Received/Requested/Committed for the Proposed Study. Please Include Government, Private, International Any Other Source**
3. **\*Funding Received so Far/Approved by Any of The Government Agencies to The Applicant to Carry Out Any Other Activity During the Last Five Years (Give Details Like Project Title, Amount Received/Approved, Funding Agency and Status of The Project)**

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 24: Budget Details of the Applicant**

#### Details of The Proposed Budget

##### **Name of the Applicant: Test Applicant**

##### **Non-Recurring Cost (Rs. In Lakhs)**

The below values are automatically calculated and filled in fields.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Equipment**  **(A)** | **Accessories**  **(B)** | **Total (A+B)** | **Contribution by Applicant (Rs in. Lakhs)** | **Total Support Requested From BIRAC (Rs in. Lakhs)** |
| 0.00 | 0.00 | 3.00 | 3.00 | 3.00 |
| **BIRAC contribution in the form of** | | | Percentage | Amount  (Rs. In Lakhs) |
| **Grant-In-Aid** | | | 100 | 3.00 |

##### **Recurring Cost (Rs. In Lakhs)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Manpower (A)** | | **Consumables (B)** | **Travel (C)** | **Contingency (D)** | **Outsourcing**  **(E)** | **Training**  **(F)** | **Total**  **(A+B+C+D+E+F)** | **Contribution By Applicant (Rs in. Lakhs)** | **Total Support Requested From BIRAC (Rs in. Lakhs**) |
| 8.00 | | 1.00 | 1.00 | 1.00 | 0.00 | 0.00 | 1.30 | 1.30 | 3.00 |
|  | **BIRAC Contribution in The Form Of** | | | | | | | **Percentage** | **Amount (Rs. In Lakh)** |
|  | **Grant-In-Aid** | | | | | | | 100.00 | 1.00 |

You just need to review the calculation and save the form.

Save

Save your form.

Cancel the form.

Cancel

#### Step 25: BUDGET DETAILS OF THE COLLABORATOR

##### **Collaborator Name: ABC Collaborator Type -Institutions**

#### Non-Recurring Cost (Rs in Lakhs)

|  |  |  |  |
| --- | --- | --- | --- |
| **Equipment**  **(A)** | **Accessories**  **(B)** | **Total**  **(A+B)** | **Total Support requested from BIRAC**  **(Rs in. Lakhs))** |
| 0.00 | 0.00 | 0.00 | 0.00 |

#### B. Recurring Cost (RS in Lakhs)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Manpower**  **(A)** | **Consumables (B)** | **Travel (c)** | **Contingency (D)** | **Training (E)** | **Total (A+B+C+D)** | **Total Support requested from BIRAC**  **(Rs in. Lakhs))** |
| 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

You just need to review the calculation and save the form.

Save

Save your form.

Cancel the form.

Cancel

**Step 26: Budget Summary**

##### Name of Company **Test Company**

##### **Budget Summary**

**Contribution by Applicant and Collaborators**

0.00

Applicant:

Collaborator 1:

0.00

Collaborator 2:

0.00

Sub Total (A):

0.00

|  |  |  |  |
| --- | --- | --- | --- |
| **Support Requested From BIRAC :** | | **Grant in Aid** | **Loan** |
| **Applicant** | 0.00 | 0.00 | 0.00 |
| **Collaborator 1** | 0.00 | 0.00 | -N.A- |
| **Collaborators 2** | 0.00 | 0.00 | -N.A- |
| **Sub Total (B):** | 0.00 | 0.00 | -N.A- |
| **Total Project Cost (A+B)** | | | 0.00 |

You just need to review the calculation and verify the form.

Verify

Verify your form.

Cancel the form.

Cancel

**Step 27: Supplementary Information**

#### Supplementary Information

*\* Please Upload only pdf files*   
*\* File Name should Contain only Alphanumeric (a-z, A-Z,0-9) and Underscore (\_)*   
*\* File size should not be greater than 2MB*

1. Provide references with full citations that are relevant to the proposal

Browse

2. Provide background on the current status of relevant research activities, either nationally or internationally

Browse

3. Describe the public disclosure for your proposal which could be put in the public domain

Browse

Browse

4. Details of any work to be outsourced

5. Please upload any additional information

Browse

If you don’t want to save this form now. You save it next time with modification.

Save as Draft

Save

Save your form.

Reset

Reset all the fields.

Cancel

Cancel the form.

**Step 28:**  [**DECLARATION DOCUMENT**](http://birac.nic.in/user/document_final_new.php?calid=61&pid=4295&action=edit)

#### DECLARATION

Browse

**\* Please Upload the Declaration Document :**

**\* Please Upload the Declaration Document :**

Browse

Please upload only pdf files

Save

Save your form.

Cancel the form.

Cancel

**Step 29: Final Submission**

#### Final Submit

\* Review all your forms whom status is “DONE” after review click on “Final Submit” Button.

\* Make sure all the forms has status “DONE”, before you click on “Final Submit” Button.